

**Certificate of Transmission by Mailing, Facsimile, or Electronic Transmission (37 C.F.R. §1.8)**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is:

☐ being deposited with the U.S. Postal Service on the date indicated below and with sufficient postage addressed to Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

☐ being facsimile transmitted to the Commissioner for Patents, U.S.P.T.O. (Fax No. 571-273-8300) on the date indicated below.

☒ being transmitted to the Commissioner for Patents via the U.S.P.T.O. Electronic Filing System on the date indicated below.

Signature: /Gary R. Fabian/ Reg. No. 33,875

Date: 3 February 2010

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of: Stanford Mark Moran	Confirmation No. 8022
Serial No.: 10/004,118	Art Unit: 1647
Filing Date: 30 October 2001	Examiner: Seharaseyon, J.
Title: METHOD FOR TREATING DISEASES WITH OMEGA INTERFERON	

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and fee are as follows:

37 C.F.R. §	Time Period	Fee	Small Entity Fee	Total
1.17(a)(1)	Extension for response within first month	\$130.00	\$65.00	
1.17(a)(2)	Extension for response within second month	\$490.00	\$245.00	
1.17(a)(3)	Extension for response within third month	\$1,110.00	\$555.00	
1.17(a)(4)	Extension for response within fourth month	\$1,730.00	\$865.00	<b>\$865.00</b>
1.17(a)(5)	Extension for response within fifth month	\$2,350.00	\$1,175.00	

**Authorization to Pay Fees**

The Commissioner is hereby authorized to charge **\$865.00** (small entity rate) to Deposit Account No. **504212** (please reference docket number **INT 00410**) for a four-month extension of time.

No additional fees are believed due in connection with this paper. However, the Commissioner is hereby authorized to charge to Deposit Account No. **504212** any fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 which may be required by this paper, with the exception of the payment of the Issue Fee.

Respectfully submitted,

Date: 3 February 2010

By: /Gary R. Fabian/

Gary R. Fabian, Ph.D.  
Registration No. 33,875  
Agent for Applicants

Intarcia Therapeutics, Inc.  
24650 Industrial Blvd.  
Hayward, CA 94545